

**FINDING YOUR WAY THROUGH THE HOME CARE MAZE\***  
**A PRACTICAL GUIDE FOR THE HOME CARE CONSUMER**

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**\*DEVELOPED BY THE FAIRFAX AREA AGENCY ON AGING IN COOPERATION WITH THE FAIRFAX HOME CARE TASK FORCE; PRODUCED BY THE HOME CARE DEVELOPMENT PROGRAM, (703) 324-5279.  
(January 2002 EDITION)**

\*Phone numbers are preceded by the area code (703) unless otherwise denoted.

## **WHAT IS HOME CARE?**

### **Care of the Patient at Home**

Home care includes a range of health and/or supportive services with two goals in mind: to enable a person who needs care to remain in his or her own home and to maintain or improve the quality of life for that person.

In her book, Home Health Care, A Complete Guide for Patients & Their Families, Jo-Ann Friedman presents the American Medical Association definition of home health care as:

The provision of nursing care, social work, therapies (such as diet, occupational, physical, psychological, and speech), vocational and social services, and homemaker-home health aide services may be included as basic components of home health care. The provision of these needed services to the patient at home constitutes a logical extension of the physician's therapeutic responsibility. At the physician's request and under his medical direction, personnel who provide these home health care services operate as a team in assessing and developing the home health care plan.

Home care services delivered to the patient in the home are possible in most cases. When given a choice between home care services or institutional care, it is not surprising that most people want to receive services at home.

### **Care to the Family Caregiver**

If the family members who have been caring for the patient need a little relief from caregiving, "respite care" can be delivered to them as well. The care provided by the family is an important factor in assessing home care service needs. Family caregivers are considered a vital part of the home care delivery system.

### **Quality Standards in Home Care**

Quality home care services can be found for the patient and family caregivers. Because home care services are delivered in private homes rather than a more controlled institutional setting, it is very important to find out the certification and training standards of the agency or workers. Agencies which are CHAP, Medicare, or Medicaid certified undergo close monitoring by state and federal inspectors and are therefore a much better choice than one which are not certified by these accrediting sources. It is a good idea to ask to see the accreditation certificate before hiring.

### **Quality in Home Care Agencies**

**CHAP**, Community Health Accreditation Program, Inc., is a subsidiary of the National League for Nursing. The federal government approved CHAP for deemed status a few years ago. CHAP is the only organization thus far which has deemed status. This means that home care agencies meeting

agencies have gone beyond minimum safety standards of other organizations. The consumer of home care services can have a high level of confidence in a CHAP accredited home care agency.

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### ***Skilled care***

practical nurses (LPN) and is under the direction of a physician. These services can include treatment.

include help with bathing, dressing, shopping, meal preparation, light separate from skilled care. These services often allow a person to remain in the home as

## **Agency and Independent Care Providers**

Care providers are employed either through an agency or independently. Of course using an agency is more costly yet benefits include in-service training and supervision of the worker by professional home care staff. As of July 1, 1992, all home care agencies must be licensed and have a Virginia Criminal Records check on file for its workers.

### ***Agency Workers***

This packet includes a partial list of home care agencies serving Fairfax County. To be on the list agencies completed a survey form which asked for costs of care, source of agency certification, areas of Fairfax County served and other general information. Section #5 should shorten the time consumers need to find services. Physicians prescribe home care services as well and may give a good agency referral for care.

### ***Independent Workers***

There are a great variety of persons and skill levels available for hire as independent home care workers. At the present time, there are no state or federal standards or laws covering independent home care workers. Section #7 of this packet provides a list of Independent Providers who have been screened through the Fairfax Area Agency on Aging. The list is updated monthly. **HOWEVER IT IS THE SOLE RESPONSIBILITY OF THE PERSONS SEEKING TO EMPLOY AN INDEPENDENT PROVIDER TO DETERMINE THE SUITABILITY OF THAT WORKER. See Section 7 for more information.**

**The Virginia Board of Nursing (Richmond) approves training programs for Certified Nursing Assistants (CNA) but not homemaker/home health aides for the home care industry.** CNA training focuses on working in nursing homes where nurses are always available to assist the CNA. The Virginia Board of Nursing also renews and suspends/terminates CNA certificates as needed. Most home care agencies eagerly hire CNAs, competency test them, and may provide additional training specific to the home care environment.

### **Adaptive Equipment and Assistive Devices**

There are many catalogs and equipment supply resources available to individuals who want to modify their environment through assistive devices or just simple "gadgets" which will make life easier. It is important to seek the advice of a physician, occupational and/or physical therapist regarding the proper fit of the equipment to the person who will be using it. Occupational therapists have a myriad of resources to assist the family or individual. See the Resource Section of the Home Care Packet that provides some catalog references to give you a start.

## **ASSESSING NEEDS: WHAT SERVICES ARE NECESSARY?**

### **Taking Stock**

With such a broad array of services available, the first step in obtaining home care is to sit down and evaluate what the actual needs are. Each situation is unique. A good way to begin is to examine functioning in the daily activities of living. Consider the variety of services available through the community and survey all available help from family, friends and volunteer sources. Finally, take account of all financial resources and bring all of these factors together. A realistic look at needs and resources will help you in planning appropriate services.

**An assessment for home care services will focus on Activities of Daily Living (ADLs) and Instrumental Activities of Daily Living (IADLs).** The seven **ADLs** are bathing, dressing, toileting, bladder function, bowel function, transferring (moving between the bed, chair, wheelchair, and/or stretcher) and eating/feeding activities. The eight **IADLs** are basic activities of life that require higher cognitive functioning than for the ADLs: meal preparation, housekeeping, laundry, money management, transportation, shopping, using the telephone, and home maintenance.

### **Functioning Day-to-Day**

Evaluate the situation. The problems may be caused by physical limitations that make routine chores difficult, or by an illness that requires temporary convalescent care. Sometimes social isolation or inadequate nutrition can cause confusion or depression. **Asking these questions may help clarify the picture:**

1. Can most routine tasks, such as dressing, bathing, fixing meals and taking medication, be performed without assistance?
2. Are opportunities for socializing available? Would group activities be helpful?
3. Is transportation available for medical appointments, running errands and shopping?
4. Can routine household chores be accomplished?
5. Can major household tasks be performed?
6. Is assistance needed continually or occasionally?
7. Are there any physical limitations that impede getting around the house?
8. Is skilled nursing required or would an assistant or companion be appropriate?
9. Are special services, such as speech therapy, physical therapy or IV therapy, needed?

**Examine present abilities, as well as disabilities, carefully.** Whether new living arrangements are deemed necessary, or whether specifically targeted services can fill in the gaps, the more realistic the assessment, the easier it is to make appropriate choices.

### **Family, Friends and Volunteer Support**

For many, a sizable network of family, friends and volunteer support is already in place. Think about those who can be depended on for some kind of help. The main questions to ask are, "Can this help be counted on regularly or just occasion-ally?" and "What is my backup if this person can't help on an occasion?" Then determine who might best fill the needs that have already been identified.

### **Financial Considerations**

Income, insurance coverage and other assets will determine the mix of paid services available privately and publicly. Outline your income and assets. Review your insurance policies and see what services are covered. If home care will be sought, review what the policy covers in detail.

## **HOW IS HOME CARE PAID FOR**

### **Medicare Home Health Coverage**

**Medicare** is a federal health insurance program under the Social Security Administration for those age 65 and over and some persons with disabilities. The regulations for Medicare are through the

21244-1850.

Home Health Medicare, (Publication No. HCFA 10969,

covered home care services well. Another HCFA publication, Medicare & You 2000 (No. HCFA-10050, Revised 1999) explains Medicare in general. **You may also call -800-MEDICARE or 1-800-633-4227 to ask any question about Medicare. The Internet is [www.medicare.gov](http://www.medicare.gov).**

**to our office, a person must meet the following four conditions to qualify for Medicare home health coverage:**

1. Your doctor must have determined that you doctor must prepare a plan for your care at home.
2. physical therapy or speech language pathology services.
3. bound. Your home can be a house or apartment, a relative's home or even a home for the aged. But a hospital or other facility that mainly provides considered homebound if you leave home only with considerable and taxing effort. Absences from home must be infrequent, or of short duration, or to get medical care. shop or for a short walk or drive.
4. The home health agency serving you must be approved by Medicare.

**(1) skilled nursing care**  
**(2) home health aide services** (intermittent, part-time); **physical therapy, speech therapy, and occupational therapy**  
and medically necessary; **(4) some medical social services; (5) some medical supplies and**

. In general, Medicare provides limited services in each of these areas so it's best to be sure that you ask the agency specifically what part of their services will be covered by Medicare, and

**Medicare does not pay for:** care not prescribed by a physician, private duty or custodial care, 24-hour care at home (unless only for one day), meals delivered to the home, prescription drugs (except those administered by a pump), care not medically necessary, nor some homemaker services (shopping, cleaning, laundry) or personal care/custodial care (bathing, toileting, or help getting dressed), if needed by themselves.

**Medicare is part of the Social Security Administration.** Questions about Medicare coverage should be directed to the Social Security Administration or your physician. **For more information about Medicare, you can call 1-800-633-4227.**

**Please call the Social Security Administration to find out what services are covered currently.** Representatives at the nation-wide, toll-free number for Social Security, **1-800-772-1213**, provide general information, can supply the most current pamphlets to you, and make appointments to file claims. Callers using TTY may call 1-800-325-0778 (hours: 7:00 a.m.-7:00 p.m.). It is best to **make an appointment before going** to either of the Social Security offices listed below in the Fairfax County area. **The office hours are 9:00 a.m.-4:00 p.m. Monday through Friday.**

**Social Security Administration  
6295 Edsall Road, Suite 220  
Alexandria, VA 22312  
(703) 274-0145**



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**Medicaid** is a publicly funded medical assistance program for low-income persons and is

In Virginia, the Department of Medical Assistance Services administers Medicaid programs and publishes the \_\_\_\_\_. Information about either can be obtained through:

**Department of Medical Assistance Services**

**Richmond, VA 23219**

The state office will likely refer you back to the Fairfax County intake staff regarding a specific  
**(703 222-0880, Coordinated Services Planning at the Fairfax County Department of Family Services (DFS)).**  
to discuss the Medicaid programs available and their eligibility requirements. Fairfax County DFS  
has four offices in the county. It  
is best to have an appointment with DFS staff before visiting their office.

Medicaid eligibility for personal care services. **Medicaid will only cover personal care services for**  
Medicaid program staff must determine  
whether it is more cost effective to use home care rather than make a nursing home placement for

**Discuss the specifics regarding eligibility with the Medicaid eligibility staff who work with the regulations.**

ADC, a refugee or a foster care child. There are income eligibility guidelines. Ask the eligibility  
worker for the current year's income eligibility levels when applying. However, if all other  
-down" procedure available  
by which a person may become eligible if incurred medical expenses equal or exceed the amount of  
eligibility.

***Social Services Home Based Care Services.***

chore, companion and homemaker services for those who need services to remain in their homes.  
Applicants must be assessed for eligibility through a social worker, who may also assist the

community. It is best to speak to a social worker with your local Department of Family Services  
(access through 222-0880) to get current information. There may be a fee for home based care

primary providers of care.

## **Private Health Insurance**

Private health insurance policies vary widely in the home care coverage that is provided. Read your policy and ask questions of your insurance agent (and employer's benefits staff person, if your policy is through your work). Also, seek advice and information from your insurance company directly.

Private health insurance may provide limited coverage much like that covered by Medicare. It is important to be clear about what is covered and whether there are restrictions such as prior hospitalization, level of care, minimum number of ADLs or IADLs required for eligibility or physician direction of the care. It is critical to understand the importance of the physician in determining the need for home care services, especially before being discharged from a hospital. What exactly does the policy cover in services? How long would services be covered? Does it cover skilled care only or paraprofessional services? What are the requirements for the service to be covered? Who has to supervise the care?

Find out if the home care agency from which you plan to receive care accepts private insurance payments. Health insurance agencies can then bill directly and you receive bills only for that portion not covered, such as deductibles.

## **Veterans Administration**

Several Veterans Administration hospitals around the country have begun pilot projects in which they offer limited home care services. Veterans with a 50% or more service-connected disability are eligible for care authorized by a physician. This does not cover custodial care (assistance in Activities of Daily Living - ADLs).

**For Fairfax County, the contact point for information is the Hospital Based Home Care Program at the Washington, D.C. Veterans Administration Medical Center. Their number is (202) 745-8427.**

## **Private Pay**

Many patients may not be covered or eligible for payment of home care services through other sources. When this is the case, the patient and/or his or her family must be responsible for the expense of home care themselves.

Some agencies accept credit cards. Others have a sliding scale fee based on income. It is important to be clear about payment arrangements as you interview the agency.

## **CHOOSING AN INDEPENDENT PROVIDER**

The Home Care Packet includes a recent edition of our **Companion Registry (CR), which is updated monthly**. The Companion Registry is a list of persons who would like to work for clients or families directly. If you hire a person from the list, you become their direct employer. These providers are not Fairfax County employees. The Companion Registry helps independent providers and persons looking to hire them find one another.

Services of the independent providers listed on the Companion Registry may include such tasks as light housekeeping, grocery shopping, meal preparation, supervision of medications, and friendly visiting. If transportation services are provided, liability insurance needs to be discussed.

Companions generally do not provide nursing care as that is skilled level care requiring specific training. Some of the providers on the registry may have nursing training and may charge more for their services when agreeing to do nursing duties.

**You may call any provider on the Companion Registry to discuss their services. You are responsible for interviewing each provider you are interested in, negotiating all terms of the services, pay, tax and Social Security withholding responsibilities, etc., with each provider.** We suggest that you put all of your agreements with the provider you choose in writing. Enclosed is a Model Agreement to use or modify as you wish. It is best if you and the provider each have a copy of the completed Model Agreement before work is started.

**The family/client is responsible for supervising the provider's work and may be considered to be the employer by the Internal Revenue Service.** Contact the Internal Revenue Service (IRS) to obtain guidance and the required tax/Social Security withholding forms you need to complete as the employer.

Staff of the Home Care Development Program at the Area Agency on Aging have interviewed each person on the list to find out more about the home care services they offer to the public. The Area Agency on Aging screens persons applying for the Companion Registry, requiring local and state criminal records checks, personal reference checks and an interview for all persons listed. **THE AREA AGENCY ON AGING DOES NOT IN ANY WAY CERTIFY, TRAIN, SUPERVISE, OR LICENSE ANY PERSONS WHO OFFER TO PROVIDE SERVICES AND WHOSE NAMES APPEAR ON THE REGISTRY.**

**THE AREA AGENCY ON AGING DOES NOT REPRESENT THAT A PERSON LISTED ON THE REGISTRY IS IN FACT A SUITABLE PROVIDER.**

**IT IS THE SOLE RESPONSIBILITY OF THE PERSON SEEKING TO EMPLOY AN INDEPENDENT PROVIDER TO DETERMINE THE SUITABILITY OF ANY PERSON LISTED ON THE REGISTRY TO ACT AS A PROVIDER.**

The following questions and chart in the attachments may help you as you choose an independent provider. But first, think about the specific tasks you need done, how often, how many hours you

will need the person, and approximately how long (weeks, months, year) the care might continue. If the person has formal training, ask for a copy of their certificate, look at the date and source of training.

Give the provider an opportunity to ask questions about your situation. Arrange a face to face meeting with the provider. Then, when checking the provider's references, ask them to give you several work-related references rather than friends.

These are a sample of questions you may want to ask the person who is their reference:

- How long have you known (provider's name) and in what capacity (e.g., friend, co-worker, neighbor, family member)?
- What qualities, as you view them, are (provider's name) their strengths in dealing with people?
- What qualities, as you view them, are (provider's name) weaknesses in dealing with people?
- To your knowledge, has she/he worked with persons such as the person for whom you're arranging care, and in what setting or capacity?
- Would you hire this person to care for yourself/mother/father/child and why?
- Why would you NOT hire this person to care for your self/mother/father/child?
- Are they insured or bonded for the services they provide?
- Are there any other comments or information that you would like to share?

**Once you have selected a provider, checked references, and negotiated the arrangements, you should develop a written agreement (see Model Agreement) that spells out:**

- specific duties
- hours and days of care
- fees and when payments will be made
- whom to call in case of emergencies
- who will be responsible for transportation
- any arrangements for sick or annual leave
- who will pay FICA (Social Security) and other taxes

After a trial period, (e.g., 1 month), evaluate with the provider the services you are receiving and make any needed changes.

See "Choosing an Independent Provider" chart in the attachments section.

## **GUIDELINES FOR EMPLOYERS/WORKERS**

**THE AREA AGENCY ON AGING STAFF ARE NOT TAX ADVISORS AND CANNOT MAKE PAYMENT OF SOCIAL SECURITY OR FEDERAL/STATE TAXES. THE FOLLOWING INFORMATION IS PROVIDED TO ASSIST YOU IN CONTACTING THE APPROPRIATE**

### **Social Security and Tax Information**

When an independent worker is hired, the patient or family may also be responsible for paying for Social Security taxes. **Check with Virginia Employment**  
**(803**  
**Administration at (1-800-772-1213) for more information.**

### **Social Security (SS/FICA) Withholdings**

**Employment Taxes for Household Employers**  
**No 926)** , and the **Household Workers"** (Pub. No. 05-10021)  
guidance and valuable information on tax liability for hiring household workers. Social Security offers more forms and publications on the issue, listed on \_\_\_\_\_. Feel free to call the Social Security Administration to talk to one of their staff Monday-Friday, 9:00.a.m.-4:00 p.m. See previous pages for

### **Federal and State Taxes**

Contact the federal and state office nearest you for current tax liability information. The IRS staff can help you with tax liability for home care worker.

### **Federal Taxes**

**INTERNAL REVENUE SERVICE (IRS)**  
**Tax Information and Assistance, 1-800-829-1040**

at:

**5205 Leesburg Pike; 1 Skyline Place, Room 900; Falls Church, VA**

**State Taxes:**

**Regional Office for the Virginia Department of Taxation  
11166 Main Street, Suite 300, Fairfax, VA 22030,  
(703) 359-6715**

**Other area offices are:**

|                          |          |
|--------------------------|----------|
| Fairfax City Residents   | 385-7882 |
| Fairfax County Residents | 222-8234 |
| Alexandria City          | 838-4570 |
| Arlington County         | 228-4017 |

**Have a Representative Give You a Ruling**

It is advisable to **have a representative at the Social Security and Internal Revenue Offices give you a ruling on your individual circumstances or tax liabilities, preferably in writing.** To do so, call their offices. Ask to talk to their representative(s). Write down the name of each person you talk to and what they said. Request an appointment if necessary and prepare for it. Write down briefly the arrangements that you have for the home care service. Take this information with you to discuss with the tax representative(s). **After being given a determination of who is to pay the tax or social security withholdings, write a summary statement on the bottom of the page and HAVE THE REPRESENTATIVE SIGN IT AT THAT TIME. Keep this safely with your tax records. Make sure you tell the home care provider what the determination is if it will affect them also.**

## **WHAT ARE MY RIGHTS AND RESPONSIBILITIES**

### **Recipient Rights**

1. agency.
- 2.
3. The right of choice of
4. The right to home care as appropriate and available.  
  
The right to be informed within a reasonable time of anticipated discharge or transfer to another agency.  
  
The right to receive information on an agency's policies, procedures, qualifications and
7. The right to know by name and position of the person responsible for the coordination of
8. The right to participate in the pl
9. The right to privacy about health, social and financial status.  
  
The right to present grievances without fear of recrimination.
11. to any  
individual outside the agency except as provided by law or third party payer contract.  
  
The right to receive information necessary to give informed consent prior to initiation of a procedure or treatment.  
  
The recipient has the right to refuse treatment within the confines of the law and to be
14. A recipient denied service solely on his inability to pay shall have the right to be referred
15. The recipient (and the public) has the right  
regarding the home care industry in general and his chosen agency in particular.

### **Recipient Responsibilities**

1. Recipient is responsible to inform physician or home care provider of any changes in his/her condition.
2. Recipient is responsible for following physician's orders and home care providers' instructions.
3. Recipient is responsible for the consequences if treatment is refused or instructions not followed as provided by home care personnel.
4. Recipient must inform physician and nurse of all medications, either prescription or non-prescription, that he/she is taking.

(The above rights information was provided by the Prince William Area Agency on Aging.)



## **WHAT CAN I DO WHEN I HAVE A COMPLAINT?**

The first step in complaint resolution often comes at the point that both worker/agency and client agree on the terms of the employment. This agency contract or client/provider agreement (see Model Agreement) establishes clear guidelines on what will be involved in care.

**But if problems do arise, you can do the following:**

1. Identify and define the problem.
2. Decide the seriousness of the problem.

**If the problem involves abuse or a criminal act, call:**

Fairfax County Police Department .....691-2131  
Communication Center, dispatches call.

Fairfax County Adult Protective Services .....324-7911  
Adult Protective Services Hotline .....324-7450

(The Adult Protective Services Unit investigates reports of abuse and neglect. It is available 24 hours a day and all information is confidential.)

Notify the Director of the home care agency, if you are using an agency.

3. If, instead, it is a problem that can be resolved, identify the parties that need to be involved to address the problem (for example: patient, family, provider, agency supervisor, agency director, Ombudsman\*).
4. Bring the appropriate people together. Be specific when describing the problem. Listen to the independent provider or agency representative when they respond to your complaint. Make sure that you understand each other.
5. Decide on a solution to the problem and agree on how this will be implemented.
6. Implement the plan you've both agreed on and then evaluate how things are going at a later specified time.

**If you cannot resolve the problem, seek additional assistance from the agency, the \*Northern Virginia Long-Term Care Ombudsman or Legal Services.**

The **Northern Virginia Long-Term Care Area Ombudsman Program** is staffed by advocates who handle complaints about long-term care services by mediating or investigating. Ombudsmen work for resolutions in the consumer's best interest. If you have a complaint about any home care service, including the agencies and independent providers listed in this packet, please call one of the ombudsmen at 324-5861. Only one call is necessary to them to get a response.

**Legal Services** staff may be reached at 246-4500.

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1. Ask for help. Don't hesitate to ask for assistance from other family members and friends and
  2. Locate a good information source or referral network. Call Fairfax County Human Services
  3. Get time out from caregiving.
  4. Join a support group to help you make decisions and cope effectively.

Find a counselor if you feel the stress of caregiving is getting to be too much.

Individual and family counseling can be found through family service agencies, community experience working with persons in your circumstance.

6. patient to remain free from pain and in a home environment. It also provides emotional support for the family.

Know your health insurance and pension plan. Consider your options.

8. For example: Social Security disability benefits before age 62, with benefits for the spouse; your spouse's IRA and life insurance policy; and the feasibility of a reverse mortgage.

Seek legal help when you need it.

Get legal advice on the best way to protect your liquid assets. Inquire about free or low legal services, if necessary, or call Legal Services at (703) 246-4500.

10. wishes to be carried out.

Co power of attorney, joint tenancy or tenancy in common arrangements, power of attorney for health care, living wills and other options can be

the Area Agency on Aging (324-5411). Once you are familiar with the terminology, seek the assistance of a personal attorney or Legal Services.

**OTHER RESOURCES:**  
**COMPREHENSIVE HOME CARE MANAGEMENT AGENCIES**

An alternative to finding appropriate home care services on your own is to enlist the help of a care management agency. The agency can assist in the assessment of needs, help coordinate various home care services and monitor those services in order to evaluate their effectiveness and make adjustments to the care plan if necessary.

The care management service varies greatly from agency to agency, so it is best to contact each one and get a clear understanding of what it offers and all costs involved. This is not a comprehensive list.

**THE AREA AGENCY ON AGING DOES NOT IN ANY WAY CERTIFY OR LICENSE ANY AGENCY THAT OFFERS TO PROVIDE CARE MANAGEMENT SERVICES AND WHOSE NAMES APPEAR IN THIS LISTING.**

**THE AREA AGENCY ON AGING DOES NOT REPRESENT THAT AN AGENCY LISTED IS SUITABLE FOR YOUR SPECIFIC NEEDS. IT IS THE SOLE RESPONSIBILITY OF THE PERSON SEEKING THE SERVICE TO DETERMINE THE SUITABILITY OF ANY AGENCY LISTED.**

***Aging Network Services* .....(301) 657-4329**

Help adult children with counseling, as well as planning and coordinating a continuum of needed services for frail elderly parent or relative both in Metro area and throughout country via a national network of geriatric social workers in private practice. [Offer home assessment and ongoing care management for elders in Metro area.] Free 1/2 hour consultation to determine suitability of services. Set fees. Web site is [www.agingnets.com](http://www.agingnets.com); e-mail: [ENS@agingnets.com](mailto:ENS@agingnets.com).

***Advanced Care Management* .....(703) 620-3294**

2203 Spinnaker Court,  
Reston, VA 20191

Serves aged and disabled. Wide range of services from assessment, planning, and service coordination to litigation. Includes a dire need paging number to contact their staff.

***Care Network for Seniors* .....(703) 222-0880**

Comprehensive team based case management program for frail persons age 60 and over and their caregivers who are residents of Fairfax County and the cities of Fairfax and Falls Church. Services include complete assessment of needs, individualized care plans, coordination of services, and follow-up evaluations. Coordinated services available at low or no cost.

***Care Options for the Elderly and Disabled* .....(703) 237-9048**

200 Little Falls Street, #501  
Falls Church, VA 22046

Works to provide humane, dignified comprehensive services to the elderly, persons with disabilities, and their families. Hourly fees quoted to prospective clients based on services required. Serves all Northern Virginia. Ask for mailing.

***Coordinated Services Planning*** .....

Central intake for Fairfax County services. This is a good place to start applying for many services available through Fairfax County. Links to other programs.

..... (703) 324-5374  
12011 Government Center Parkway, Suite 708

Case management services for elderly and disabled persons with multiple needs. Includes assessment in home, care planning, assistance in obtaining needed services, and coordination of services and

Participates in a state grant-funded program which offers case management on a sliding scale fee to Fairfax County residents age 60 and over. Services are also available to those not eligible for the

## **OTHER RESOURCES: RESPITE CARE**

**Respite care** is short-term care given to persons with disabilities who are living in the community, to allow their caregivers some time away from their caregiving responsibilities. The relief/respice care may be provided either in or out of the home.

### **Prepare Ahead When Possible**

**Be aware that most respite programs have an admissions application packet and process to complete prior to admission.** Although it is not always possible to prepare ahead, doing so can reduce caregiver stress when placement is necessary.

**When contacting a facility or program, ask for the admissions or social work staff.** Ask them what paperwork and medical exams must be done prior to admission and how recent they must be. Also ask about the training credentials of the direct care providers who will care for your family member once they are admitted. Do they have ongoing training or in-services? Some care may be covered by Medicare, Medicaid, private health insurance, or programs under the Department of Family Services.

The following organizations report that they provide respite care or can assist caregivers concerning respite care. You may also want to call agencies listed in the enclosed Home Care Organizations List, or providers listed on the Companion Registry.

**THE AREA AGENCY ON AGING DOES NOT IN ANY WAY CERTIFY OR LICENSE ANY AGENCY THAT OFFERS TO PROVIDE RESPITE CARE AND WHO'S NAME APPEARS ON THIS LISTING. THE AREA AGENCY ON AGING DOES NOT REPRESENT THAT AN AGENCY LISTED IS IN FACT SUITABLE.**

**Carefully screen anyone you hire privately. IT IS THE SOLE RESPONSIBILITY OF THE PERSON SEEKING TO USE RESPITE CARE TO DETERMINE THE SUITABILITY OF ANY RESPITE PROVIDER.**

### **Respite Providers**

***ElderLink, Options For Caregiving* ..... 324-5374**  
12011 Government Center Parkway, Suite 708  
Fairfax, VA 22035

Service: For elderly/disabled persons with multiple needs. In-home assessments, care/service planning. Call for info/appointment. .

**Fairfax Nursing Center** ..... 273-7705

10701 Main Street  
Fairfax, VA 22030

-30 days inpatient care. Advance application  
needed for overnight stay. Vacation: 1-30 days not considered enrolled in nursing home.

..... 246-2947  
Respite Care Program

Fairfax, VA 22030

Service: Alzheimer's Disease and related dementias; Provides respite care at selected Adult Day  
p.m., Mon-Sun, as staff available.

**Alzheimer's Family Day Center** ..... Call 532-8899 for both sites  
Burke Site Open:  
2036 Westmoreland Street  
Falls Church, VA 22043  
Burke, VA 22015

Monday through Friday. Burke site service hours differ. Offer classes for caregivers, support group  
twice a month. Eight session "Dementia Home Health Caregiver" class offered quarterly. Call for

**Goodwin House West** .....  
3440 South Jefferson Street  
Falls Church, VA 22041-3120

need nursing home care. Respite care rooms available for short stays, minimum 14 days.

**Hebrew Home of Greater Washington** .....  
6121 Montrose Road  
Rockville, MD 20852

2 weeks minimum stay. Other non-sectarian, affiliated programs are: adult day care, rehabilitation  
care, outpatient services, family support. Hirsh Health Center, (301) 816-5004, specializes in

weekdays, offering activities, family support. Rakusin Low Vision Clinic: only low vision clinic in  
region.

***Iliff Nursing Home*** ..... 560-1000  
8000 Iliff Drive  
Dunn Loring, VA 22027

Service: 5-day minimum inpatient care.

***Leewood Nursing Home*** .....256-9770, ext. 304  
7120 Braddock Road  
Annandale, VA 22003

Service: Takes variety of care levels in nursing home. Also have Home for Adults and Adult Day Care Programs. Minimum 3-day inpatient care. Activities.

***Manor Care Nursing Home*** ..... 379-7200  
550 South Carlyn Springs Road  
Arlington, VA 22204

Service: No minimum stay for inpatient care. Alzheimer's Disease specialization.

***Mt. Vernon Nursing Center*** ..... 360-4000  
8111 Tiswell Drive  
Alexandria, VA 22306

Service: 2-week minimum stay.

***Northern Virginia Training Center for the Mentally Retarded***..... 323-4000  
9901 Braddock Road  
Fairfax, VA 22032

Service: Initial application must be made through the Fairfax-Falls Church Community Services Board at 10461 White Granite Dr., Ste. 33, Oakton, VA 22124, 324-4400. Family support.

***Oak Meadow Nursing Center***..... 765-6107  
1510 Collingwood Road  
Alexandria, VA 22308

Service: 1-week minimum inpatient care, private and semi-private rooms, depending on availability. Therapy and stroke recovery specialties.



.....

desired, includes activities. No holiday or weekend admission for new admission, but will try to accommodate.

.....

836-8838

Service: 2-day minimum inpatient care of stay. Supply arrangements depend on Length of stay.

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- friends
- bulletin boards/newsletters
- church/synagogue
- volunteer programs
- support groups
- community service programs

## **OTHER RESOURCES: OTHER OPTIONS TO CONSIDER & CAREGIVER SUPPORT**

This is not a comprehensive list of all services that may be available. For more information, the staff of the Fairfax Area Agency on Aging (324-5411) may help you. **Ask to speak to an Outreach worker.**

### **Fairfax County Services**

*Fairfax County Coordinated Services Planning* ..... 222-0880  
TDD 803-7914

Designed to assist County residents who have a problem and do not know where to get assistance. The office keeps up-to-date information on all human services in the Metropolitan area, including private, voluntary and public services.

*Adult Protective Services* ..... 324-7450  
*Fairfax Area Agency on Aging* ..... 324-5411  
*Fairfax County Dept. of Housing and Community Development* ..... 246-5010  
TDD 385-3578

#### *Fairfax County Office of Family Services (financial/social) service*

*Fairfax* ..... 324-7500  
TDD 222-9452  
*Route 1, Alexandria* ..... 799-8400  
*Falls Church* ..... 533-5300  
*Reston* ..... 481-4052

### **Fairfax County Community Mental Health Centers**

All centers provide a full range of counseling services at sliding scale fees. Geriatric teams will visit the home if the need arises. Holds workshops for the families.

*Alexandria Mental Health (for Alexandria City residents)* ..... 838-6400  
*Northwest Center (North Co. residents)* ..... 481-4100  
*Chantilly Satellite Office* ..... 968-4000  
*Mt. Vernon Center (South County residents)* ..... 360-6910  
TDD 799-4363  
*Springfield Satellite Office* ..... 866-2100  
*Woodburn Center (Central County residents)* ..... 573-0523  
TDD 207-7735

**Home Delivered Meals** ..... 324-5411  
Ask for Meals on Wheels program staff. The program provides two nutritious meals a day: a hot lunch meal and a cold meal, which includes a sandwich. Meals are delivered five days a week by volunteer teams. In some areas, weekend service is available. Homebound individuals (age 60 and over) who are unable to shop and prepare food for themselves or who have no one to do so for them are eligible. The cost of meals to the recipient is determined by a sliding scale and ability to pay.

**Liquid Nutrient Supplement** ..... 324-5411  
Serves homebound individuals who are unable to meet their nutritional needs through normal food intake. Clients must have a physician's written prescription to participate in the program. Financial eligibility required.

**Friendship, Senior** ..... 324-5411  
Provides companionship and support to isolated and/or homebound seniors through visits by community volunteers. Sponsored by the Fairfax Area Agency on Aging.

**Telephone Reassurance** ..... 324-5411  
Persons who are isolated or need socialization are matched with a volunteer caller. The volunteer calls once a week at a mutually agreed on time to talk with the client.

**Adult Day Care and Day Health Care Centers**  
Designed for adults who have some physical or mental limitations. Programs vary, but may include services such as personal care, therapies, midday meals, various social activities, and transportation to and from the center.

Day care can provide an excellent alternative to premature institutional placement of the frail or others who can no longer function safely alone. Listed below are agencies in the area which provide adult day care services. Most programs have fees based on a sliding scale.

(Please see next page for a listing of Adult Day Health Care Centers.)

## **Fairfax County Health Department Day Health Care For Older Adults**

***Annandale Center*** ..... 750-3316  
7200 Columbia Pike, Annandale, VA 22003

***Lewinsville Center*** ..... 734-1718  
1609 Great Falls St., McLean, VA 22101

***Lincolnia Center*** ..... 914-0226  
4710 N. Chambliss Street, Alexandria, VA 22312

***Mt. Vernon Center*** ..... 799-8570  
8850 Richmond Highway, Alexandria, VA 22309

***Alzheimer's Family Day Center*** ..... 532-8899  
Chesterbrook Presbyterian Church  
2036 Westmoreland Street, Falls Church, VA 22043

***Burke Site*** ..... 532-8899  
6304 Lee Chapel Road, Burke, VA 22015  
(Burke site offers different hours of service)

Services offered Monday-Friday. Primarily for persons with Alzheimer's Disease or other dementia. Also provide in-home care hourly, daily, overnight.

***Leewood Adult Day Care Center*** ..... 256-9770, ext. 309  
7120 Braddock Road, Annandale, VA 22003

Services: Monday-Friday, 7:00 a.m.-6:00 p.m., late service extra charge. Full or half-day arrangements. Veterans Admin. contract available. Access to FASTRAN, physical therapist, beauty/barber shop, podiatrist.

### **Transportation and Escort Services**

Available to help seniors get to medical appointments or to go shopping. Apply for services in advance.

### ***FASTRAN***

Personalized, door-to-door, shared ride transportation service for Fairfax County citizens who must meet income eligibility. Lift equipped vehicles are available for wheelchair residents. Disabled individuals are welcome to have a companion travel with them. **All residents who wish to use FASTRAN must be certified.** Once certified, specific rides are arranged by calling the scheduling office (Dial-A-Ride) 24 hours to one week in advance of the ride needed. The Dial-A-Ride hours are 10:00 a.m. to 2:00 p.m. Medical and essential shopping needs are priority services.

Certification & Scheduling Office ..... 222-9764  
TDD 324-7079

(voice) ..... (202) 962-1825

above number before 3:00 p.m. the day before ride is needed.

***Multiple Sclerosis Society*** .....

Provides no-cost transportation vouchers for MS patients to doctor twice/month. Allow mailing time for vouchers. Also has caregiver support groups.

Links an individual to assistance in case of an emergency.

***Vials of Life*** .....

222-0880

Forms, vials and door stickers are used in this program and can be obtained through this

Participants are provided with forms to record personal and/or family medical information.

emergency personnel in case of a life-threatening emergency.

***Lifeline*** .....

.. 1-800-543-3546

**Other Services**

***Library, Fairfax County Access Services*** .....

12000 Government Center Parkway, Suite 123 .....

TTY 324-8365

Fairfax, VA 22035-0012 .....

e-mail: sjapikse@vsla.edu

(Located in the Fairfax County Government Center)

patrons' requests. These include regular and large print books and magazines as well as informational materials about available services, assistive devices, support groups and rehabilitation

***Home Maintenance and Repair*** .....

..... 246-5154

Through the "Home Repair for the Elderly and Disabled Program," a home improvement specialist can give suggestions on how to modify a home to accommodate a disability. Services include minor

charge for persons who qualify. Income eligibility.

***Low Cost Loan Program for Extensive Remodeling Projects*** .....

..... 246-5155

***Christmas in April*** (RPJ Foundation)..... 528-5606  
Volunteer groups provide home repair to selected homes of low/limited income elderly in need of service on a single day in April. Help is provided through volunteer groups, "Christmas in April," and the Dept. of Housing and Community Development. Homes to be repaired are prescreened in preparation for the one-day event in April. Call to obtain an application.

### **More Agencies Serving Persons with Disabilities**

***Project Word, Inc.*** ..... 525-9673  
(Working and Organizing Resources for Persons w/Disabilities). Computer database with many resources. Volunteer non-profit organization, which responds to individuals and their families requesting assistance, support and information about resources necessary for living with a disability. No charge for services.

***Virginia Assistive Technology System (VATS): On-Line Technology Database*** ..... 993-3670  
VOICE/TTD 1-800-333-7958

### ***Center for Disabilities***

#### ***Northern Region, George Mason University***

This Information & Referral system and database houses a statewide database on Assistive Technology devices and services. You may dial into the database directly using a computer, modem and communication software. Use Modem:9600 BPS or less, 8N1; Terminal Type: VT100. Call VATS for more information.

***Endeppendence Center*** ..... VOICE/TDD 525-3268  
3100 Clarendon Boulevard TTY 525-3553  
Arlington, VA 22201  
(Near Clarendon Metro; Located next door to the State Dept. Credit Union)

An independent living program that is a community-based resource center serving Northern Virginia residents with severe disabilities. Services provided include advocacy, housing assistance, disability related I&R, registry of Personal Care Attendants, Peer Counseling, etc. The center offers a transitional independence program for mildly MR and learning disabled adults aged 18 years and older.

### **Telephone Services**

***AT&T National Special Needs Center*** ..... TDD 1-888-663-0363  
Special telephone equipment for use by the disabled, including TDDs available for purchase.

#### ***Telephone Services for the Deaf***

The following agencies provide 2-way communication for the deaf and hearing-impaired communities in the METRO area. Deaf persons communicate through a special unit called either a Teletypewriter (TTY) or a telecommunications Device for the Deaf (TDD).

***Fairfax County Intake*** ..... TDD 803-7914  
Assist county residents with information or TDD numbers for other county agencies.

**Relay Systems Center** .....  
Services 24 hours/day.....Voice 800-828-1140

**Directory Assistance/Information** ..... Voice/TDD 800-422-2319  
Will give TDD number for state agencies.

..... Voice 202-638-5630  
Sign Language Interpreter Referral Service

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**Loan Closets**

Listed are agencies that maintain free loan closets for medical equipment:

..... (202) 537-6800  
Arthritis patients only - limited equipment available from loan closet. Will provide financial help (up

**Easter Seal Society for Crippled Children and Adults** ..... 538-4480

**Fairfax County Department of Recreation** .....  
Warehouse: leave name, phone, message for call back.

**Multiple Sclerosis Society** .....

**Washington Area Wheelchair Society** ..... ...(301) 495-0277

**OTHER RESOURCES: SUPPORT GROUPS/CAREGIVER GROUPS,**  
**OTHER IMPORTANT PHONE NUMBERS**

Support groups meet on a regular basis to discuss a common concern. Members offer both emotional support to one another and many times suggest useful techniques for handling problems. The Washington Post Health section, published Tuesdays, lists many support groups meeting in the area and contact information. For assistance in locating an appropriate support group, you may want to also call public education staff at area hospitals.

***THE AREA AGENCY ON AGING DOES NOT REPRESENT THAT A SUPPORT GROUP LISTED IS IN FACT SUITABLE. IT IS THE SOLE RESPONSIBILITY OF THE PERSON SEEKING A SUPPORT GROUP TO DETERMINE THE SUITABILITY OF A GROUP LISTED.*** The following is a partial list of support groups:

**Alzheimer's Disease**

- Alzheimer's Association of Northern Virginia  
10201 Lee Highway, Suite 210  
Fairfax, VA 22030-2222  
(703) 359-4440
- Alzheimer's Disease Referral Center: 1-800-207-8679
- Alzheimer's Disease Education and Referral Center (ADEAR): 1-800-438-4380  
(Toll free for information and referral. Established 1990 by National Institute on Aging.)

**Arthritis**

Arthritis Foundation Metropolitan Washington Chapter  
4455 Connecticut Avenue, N.W., Suite 300  
Washington, D.C. 20008-2302  
(202) 537-6800

**Cancer Support Groups**

- Fairfax Hospital  
3300 Gallows Road  
Falls Church, VA 22046  
(703) 698-3201 (Oncology)
- American Cancer Society  
124 Park Street, SE  
Vienna, VA 22180  
(703) 938-5550
- American Cancer Society  
1875 Connecticut Avenue, N.W., Suite 730  
Washington, D.C. 20009  
(202) 483-2600
- Reach to Recovery: 1-888-227-6333



**Ostomy**

Northern Virginia Chapter, United Ostomy Association

124 Park Street, S.E.  
Vienna, VA 22180

**Children with Complex Health Care Needs**

The ARC of Northern Virginia

Falls Church, VA 22046  
(703) 532-3214

**Diabetes**

American Diabetes Association (ADA)

Washington, D.C. 20036  
(202) 331-8303

**Head Injury**

Northern Virginia Head Injury Association

Springfield, VA 22152  
(703) 569-1855

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**● HEAR NOW**

Denver, CO 80231  
1-800-648-HEAR

- Nor  
and Hard of Hearing Persons  
10363 Democracy Lane

Voice (703) 352-9056; TTY 352-9055  
*Service: Assistive device display/demonstrations*

- 
- Mended Hearts, National Capital Area  
Washington Hospital Center  
(202) 877-6901

- Mended Hearts  
American Heart Association  
Northern Virginia Council  
7203 Poplar Street  
Annandale, VA 22003  
(703) 941-8500

### **Huntington's Disease**

Huntington's Disease Society of America  
Washington Metro Area Chapter  
8303 Arlington Blvd., Suite 210  
Fairfax, VA 22031-2900  
(703) 204-4634; Helpline: (703) 323-1403

### **Multiple Sclerosis**

Multiple Sclerosis Society  
2021 K. Street, N.W., Suite 715  
Washington, D.C. 20006  
(202) 296-9891

### **Parkinson's Disease**

American Parkinson Disease Association  
Information and Referral Center  
(804) 982-4482

### **Widows and Widowers**

Widowed Persons Services of Northern Virginia  
Warm Line: (703) 281-9595

### **On-going support groups in numerous subject areas:**

- Mental Health Association of Virginia (ARCH)  
(804) 649-8481, ext. 309
- The Women's Center of Northern Virginia (Men may also participate)  
133 Park St., N.E.  
Vienna, VA 22180  
(703) 281-2657

### **Support Groups for Relatives of Elderly Parents**

Fairfax County Community Mental Health Centers:

- Northwest Community Center  
1850 Cameron Glen Drive, Suite 600  
Reston, VA 20190  
(703) 481-4100

- 3340 Woodburn Road  
Annandale, VA 22003
- Mt. Vernon Community Mental Health Center  
9 Holland Road  
Alexandria, VA 22306

### **CAREGIVER SUPPORT GROUPS**

Agencies who offer instruction on general health care and patient care to members of the family

- Offers home nursing courses at Alexandria chapter.
- 601 E Street, NW.  
Washington, DC 20049

Call for information on current publications. Offers home study packet "Home Is Where The

financial/legal issues, medication, nutrition, home safety and family interactions. Cost is \$16.00 per kit.

## **OTHER RESOURCES: READING MATERIALS**

***THE FOLLOWING HOME CARE RELATED BOOKS MAY BE HELPFUL TO YOU. LOOK FOR, OR ORDER THEM THROUGH YOUR LOCAL LIBRARY OR DISCOUNT BOOKSTORES.***

Home Health Care, A Complete Guide for Patients & Their Families by JoAnn Friedman. W. W. Norton & Company, 500 Fifth Ave., New York, NY 10110, 1986. (ISBN 0-393-01889-X).

Home Care for Older People: A Consumer's Guide. Anne Werner & James Firman. United Seniors Health Cooperative, 1331 H. Street, N.W., Ste 500, Washington, D.C. 20005-4706, Publication list.

Home Care for the Elderly: A Complete Guide. By Jay Portnow with Martha Houtman. McGraw Hill Book Co., 1221 Avenue of the Americas, New York, NY 10020, 1987. (ISBN 0-8-050582-9).

Caregiving: Helping An Aging Loved One, by Jo Home. AARP Books, Dept. CBI, Scott, Foresman, & Co., 400 S. Edward St., Mt. Prospect, IL 60056, 1985. (ISBN 0-673-24822-4).

How To Care For Your Parents: A Handbook for Adult Children, by Nora Jean Levin. Storm King Press, Washington, D.C., 1990.(ISBN 0-394-75690-8). Covers getting organized, financial resources/ obligations.

The Road Ahead: A Stroke Recovery Guide. By The National Stroke Association, 1420 Ogdon St., Denver, CO 80218, 1986.

The Caregiver's Guide: Helping Elderly Relatives Cope with Health & Safety Problems. Caroline Robb, R.N. Houghton Mifflin Co., Boston, MA. 1991, first printing. ISBN 0-395-58780-8 (pbk). Covers what's normal aging, common body function losses, managing medications, caring for convalescent at home, help & where to find it.

Caregiving: A Handbook for Caregivers. A three-ring binder of publications dealing with common problems faced by caregivers. Available from NSC Education and Family Support Services, Good Samaritan Hospital & Medical Center, 1015 N. W. 22nd Avenue, Portland Ore. 97210-5198.

Women Take Care: The Consequences of Caregiving in Today's Society. By Tish Sommers and Laurie Shields with the Older Women's League Task Force on Caregivers and Judy MacLean, consulting writer. Triad Publishing Company, 1110 N.W. 8th Avenue, Suite C, Gainesville, FL 32601. (ISBN 0-987404-27-6).

## **Books on Alzheimer's Disease and Related Disorders**

\_\_\_\_\_, by Alzheimer's Disease Assoc.

### The 36 Hour Day

Disease. ISBN 0-8018-2660-8 (pbk).

### The Loss of Self

Cohen and Eisdorfer. ISBN 0-452-25946 (pbk).

### The Hidden Victims of Alzheimer's Disease

University Press. ISBN 0-8147-9663-x (pbk).

### Alzheimer's: A Caregiver's Guide and Sourcebook

Assistance Foundation, 15825 Shady Grove Rd., Ste 140, Rockville, MD 20850. 1988. ISBN 0-471-52203-1 (pbk).

\_\_\_\_\_, Helping Family Members, Volunteers, and Staff Improve Quality of Life of Nursing Home Residents Suffering From Alzheimer's Disease and Related Disorders, by Coons, Metzelaar, 43216.

### When Love Gets Tough

Sight Books, Inc., Drawer 2058, Hereford, Texas 79045.

### Care of Alzheimer Patients

How to Care for Your Parents: A Handbook for Adult Children, ISBN 0-93-516-6033(pbk).

\_\_\_\_\_, by Zgola. Guide to programming activities for persons with Alzheimer's Disease and Related Disorders.

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## **Association, Northern Virginia Chapter:**

Northern Virginia Chapter  
10201 Lee Highway, Suite 210

(703) 359-4440

The Alzheimer's Association maintains a library on site that the public can use for reference. An  
and Friday 8:00-4:00.

### What's Wrong With My Grandma

Grandpa Doesn't Know It's Me, by Donna Guthrie. A children's book.

Alzheimer's Disease; the Silent Epidemic, by Julia Frank. Good for teens.

What's Wrong With Daddy? Written for pre-teens and teens.

### **Other Publications That May Be Helpful:**

The AARP - American Association of Retired Persons, 601 E. St. N.W., Washington, D.C. 20049, Telephone (202) 434-2277 provides a wealth of publications free of charge or for a very minimal fee, such as:

- (1) A checklist of Concerns/Resources for Caregivers.
- (2) Miles Away & Still Caring, D12748.
- (3) A Handbook About Care in the Home, D955.

National Association for Home Care  
228 Seventh Street, SE  
Washington, D.C. 20003-4306  
Phone: (202) 547-7424  
Fax: (202) 547-3540

Publications, videos for consumers and professional home care agencies, regarding home care; worker training info.

### **Books on Legal Issues:**

#### Legal and Financial Planning Guide for Families.

Available from NSC Education and Family Support Services, Good Samaritan Hospital & Medical Center, 1015 N.W. 22nd Avenue, Portland, Ore. 97210-5198, Telephone (503) 229-7348. This handbook, written by the president of the American Academy of Elderlaw Attorneys, includes practical advice concerning care options and financing, decision-making for the impaired family member, and wills, probate and trusts.

The Rights of Older Persons: A Basic Guide to The Legal Rights of Older Persons Under Current Law, by Robert N. Brown. Southern Illinois University Press, Carbondale, IL. 1989. ISBN 0-8093-1432-0 (pbk).

[A:MAINSECHCHWORD.2002 -- Revised 01/04/02]

## **GLOSSARY: AGING-RELATED TERMS**

\_\_\_\_\_ - (accessory dwelling unit) A second, completely private living unit built within the extra space of a single family home, distinguished by the presence of a second kitchen. Requires

activities of daily living (ADL) - Basic functions performed by the individual to maintain self-care

some programs is based on assessment of ADL functioning.

acute care facility

acute condition - Those conditions having a sudden onset, sharp rise, and short course, and which

Adult Care Residence (ACR) - formerly "homes for adults"; a licensed establishment for the care of

adult day health care - An all-day therapeutic program for individuals incapable of caring for themselves, including counseling, one or more meals, socialization with peers, and constant supervision.

## Audio Loop

sounds better. The audio loop must be compatible with the person's own adaptive hearing device or borrowed device so advanced planning is needed. Generally arranged at public meetings as a

Adult protective services (APS) - Services designed to assist elderly persons who, because of

from neglect, abuse or hazardous situations without assistance from others. Services may include (1) counseling to the individual, his/her family and other responsible persons, (2) alternative living arrangements, needed medical care, or legal representation.

ageism

aging in place - An option chosen by an individual who maintains him/herself in the community, and

aging network - Public/private organizations and persons from federal to local level which are

information regarding availability, operations, best practices/development to meet the needs of older adults.

## **Glossary of Aging Terms (Continued)**

ambulatory - The ability to walk with little or no assistance, being capable of making an exit from a building in an emergency without assistance.

Americans with Disabilities Act (ADA) - Federal law which mandates that businesses and services make reasonable accommodations to meet the needs of persons with disabilities. Examples: building ramps so persons using wheelchairs may enter a space previously accessible only by stairs, providing a sign language interpreter for a meeting, or printing brochures in large type.

Assistive technology - Use or development of equipment to enable a person to live more comfortable. Examples: wheelchair, hearing aids, audio loops, or other adaptive equipment.

at-risk elderly (frail elderly) - Older persons who have difficulty maintaining functional independence. May need assistance. (See ADL and IADL.)

auxiliary grants - A state/local funding program for payment of services for low-income individuals in an Adult Care Residence (ACR). The rate is determined by a particular home's actual costs up to a state set maximum and administered by the State Department of Social Services.

caregiver/caretaker - An individual who provides services to a frail elderly person in the home for free or for a fee. The caregiver is often a relative.

case management - The process of working with clients on an individual basis in order to assure that they receive the formal and informal services they need. A manager/team supervises and coordinates the planning and delivery of services from the first identification of need. Usually ongoing service.

catastrophic illness - An illness that might require medical services which may not be completely covered under Medicare and for which the individual would be responsible for payment (unless the individual was further insured.)

catchment area - The geographical area served by a particular government agency, health facility, etc. Boundaries are often defined differently by each service provider. The Fairfax Area Agency on Aging serves residents of Fairfax County, City of Falls Church, and City of Fairfax.

Certificate of Need (CON) - Certificate of approval issued by federally established regulatory agency to health care facilities that propose to construct or modify a health care facility, incur a major capital expenditure, or offer a new or different health service. CON's are required by law in order to proceed with these facilities or modifications.



## **Glossary of Aging Terms (Continued)**

Certification Medicare/Medicaid beds - A classification for reimbursement purposes of beds in nursing homes in which Medicare and/or Medicaid patients may receive care. Private patients may be paid for in the certified/uncertified nursing home beds. Medicare and Medicaid will only pay for delivery of care in certified beds. Limits number patients funded by government programs.

chore services - The performance of household tasks, essential shopping, simple household/home repairs, and other light work necessary to enable an individual to remain in his own home. Usually frailty or other condition causes inability for person to perform such tasks himself.

chronic condition - Those illnesses which are marked by a long duration or frequent recurrences.

cohort - A group of people who are born at approximately the same period of time whose lives have been impacted by historical or social/cultural events, such as the Great Depression, World Wars, Vietnam or Watergate.

companion services (home care) - Provision of light housekeeping, companionship, errand and essential shopping, etc., to adults, who, because of their functioning level, are unable to perform these tasks themselves.

congregate housing (sheltered or enriched housing) - Specially planned, designed and managed multi-unit rental housing, typically with self-contained apartments. Supportive services such as meals, housekeeping, transportation, social and recreational activities are usually available, as part of the cost or for a fee.

congregate meals - The procurement, preparation, conveyance, and provision of nutritionally balanced meals that meet one-third of the current Recommended Dietary Allowance (RDA) for individuals sixty years of age and older, and for their spouses, regardless of age. The federal Older Americans Act defines standards for this mandated service.

Consolidated access services - Identifying/locating older persons in need of services and assessing and periodically reassessing their need for services. Collect and provide information to link persons with the opportunities, services, and resources needed to meet their problems and needs. Includes follow-up to determine whether services were received and met the need identified. Provides for the maintenance of proper records for use in identifying services offered and gaps in existing service systems.

Continuing Care Retirement Community (CCRC) - Also called "Life Care" (separate listing). A community which provides several levels of housing and services for the elderly, ranging from independent living units to skilled nursing care, often on one site but generally in separate buildings. Admission is usually limited to persons of sound physical/mental/financial status. \

## **Glossary of Aging Terms (Continued)**

continuing education - Activities designed to provide individuals with opportunities to acquire knowledge and skills suited to their interests and capabilities through either formal academic courses or informal methods, with a view toward either vocational or personal enrichment.

continuum of care - The range of institutional and non-institutional services and resources that provide comprehensive options to meet persons' need for care.

custodial care - General nursing and supportive services, including personal care provided by nursing homes classified as inter-mediate care facilities.

dementia - A cluster of symptoms that involve deterioration of a number of cognitive functions, such as memory.

Diagnostic Related Groups (DRGs) - Categories of illnesses that determine how much hospitals are paid for treating Medicare patients. (See Prospective Payment System.)

disability - The Americans with Disabilities Act (ADA) defines the term with respect to an individual as: (1) a physical or mental impairment that substantially limits one or more of the major life activities of such individual, (2) a record of such an impairment, or (3) being regarded as having such an impairment. See "Individuals with Disabilities" and "Major Life Activities" (ADA, 1990).

discharge planning - A process of identifying the health and psycho-social needs of patients to be released from an institution, and making recommendations about how these needs can be met in the community.

domiciliary care facility - Group living arrangements providing staff supervised meals, housekeeping and personal care, and private or shared sleeping rooms. Must meet licensure, design and operating standards, including minimum staff requirements.

Durable Medical Equipment (DME) - Covered by Medicare at least in part when ordered by the doctor. Ex.: wheelchairs, walkers, oxygen equipment.

Echo housing\* - (Elder Cottage Housing), "Granny Flats" - Temporary, small, freestanding housing located in backyard of a family's primary residence.

Eldercare - Assisting older persons remain self-sufficient through direct or referral services.

Eldercare Locator (1-800-677-1116) helps connect persons looking for assistance with resources across the country.

## **Glossary of Aging Terms (Continued)**

Elderhostels - Networks of colleges and universities that offer older adults special low cost, short term residential academic programs combining college level courses with extracurricular activities. Available internationally.

emergency services - The timely provision of advice, counseling, location of resources and referral to sources of assistance when an older person experiences an emergency. May include cash assistance which does not duplicate other available services.

foster care homes - Single family homes in which non-related older persons live with a foster family. The family provides meals, housekeeping and personal care. These homes are not required to be licensed by the state if fewer than four persons, generally, are served.

friendly visitor - Regular visits to the homes of socially and geographically isolated individuals to provide socialization.

functional age - An assessment of age based on physical or mental ability rather than on the number of years since birth.

geriatrician - A physician (MD) who specializes in the disorders of the elderly. Two primary care (M.D.) disciplines offer Board Certification in Geriatrics: Family Practice and Internal Medicine. Ask the physician for these credentials.

gerontology - The study of aging from a multidisciplinary perspective, including clinical, biological, legal, economic, psychosocial, historical, etc. Gerontologists examine the aging processes and their impacts on the individual and society, and often work in the operation/development of program services to older adults. Others are more academically oriented, as sociologists, anthropologists, psychologists, etc.

guardian - A person legally placed in charge of the affairs of a minor or someone deemed incapable by the courts of managing his/her own affairs.

home-based care - The provision of health and/or supportive services in the home to individuals who are ill or disabled, but who do not require institutional care.

home delivered meals (Meals on Wheels) - The procurement, preparation, conveyance, and provision of nutritionally balanced meals that meet one-third of the current Recommended Dietary Allowance (RDA) for individuals who are homebound, unable to prepare their own meals, and have no one to prepare food for themselves. The meals are delivered to homes of individuals who qualify.

## **Glossary of Aging Terms (Continued)**

home equity conversion plan - A plan that enables older homeowners to turn their property equities into periodic payments, annuities, or tax deferrals. There are fees involved. This plan is often utilized to repair older homes, provide for one's care, etc.

home health services - The provision of basic health services to individuals who can be cared for at home. Includes direct nursing care under medical supervision, occupational/physical/speech therapies, special services for persons with disabilities.

homemaker/personal care services - The provision of non-medically oriented services by trained personnel under professional supervision. Services may include personal care activities, nutrition-related tasks, light housekeeping, and respite for family caregivers. hospice care\* - Care that addresses the physical, spiritual, emotional, psychological, social, financial, and legal needs of dying patients and their families. Provided by an interdisciplinary team of professionals and volunteers in a variety of settings, both inpatient and at home, and that includes bereavement care for the families.

Independent living\* - Lowest level of healthcare. Similar to an apartment; has emergency alert system, handrails in bath/shower, lighting and environmental adaptations to meet needs of elderly. Persons should be allowed to use their own furnishings.

Instrumental Activities of Daily Living (IADL) - More complex functions performed by the individual to maintain self-care, such as cooking, cleaning, laundry, shopping, paying bills. Assessment of individuals examines their IADL functioning to determine need for services.

institutionalization - Admission of an individual to an institution, such as a nursing home, where he or she will reside for an extended period of time or indefinitely.

intake - (See consolidated access.)

intermediate care facility (ICF) - Provides 24-hour health-related care and services to individuals who do not require the degree of care or treatment normally given by a hospital or skilled nursing facility but who do require health-related institutional care above the level of room and board. Licensed nursing facility.

Learning in Retirement Institute (LRI) - Learning opportunities in an intellectual, social setting where members can share continued education and socialization events. Short-term courses, forums, community field trips. Modest membership fee. Locally, at George Mason University and Northern Virginia Community College.

## **Glossary of Aging Terms (Continued)**

Lifecare facility\* - A continuing care retirement community for seniors for which there is a "lifetime contract" for living accommodations and varying intensities of healthcare, from independent-living units through skilled-nursing care for the duration of the resident's life. Contract, if properly worded, may entitle the resident to a homestead exemption if it has been determined that the resident has been granted equity in the property. Financial arrangements include a substantial entrance fee plus monthly charges.

linkage - Aiding a client to obtain needed services, often supported by formal agreement between two or more different programs.

living will - A legally binding document setting forth the prior wishes of a person who is unable to participate in decisions about treatment during terminal illness, specifying that heroic measures are not to be used. This document is specifically protected by law which enforce certain penalties in the event of violation.

long-term care (LTC) - Services, programs, or activities designed for the treatment, management, and care of persons with continuing impairments. The care may be provided at home, in community facilities, or in institutions.

long-term care facility - An adult care residence or nursing home that provides for personal care and/or nursing care for an extended period of time.

Medicaid - A program established under the Social Security Act to pay for the health care needs of low income individuals. This program is jointly funded by the federal and state governments and is administered by the states. The regulations and eligibility guidelines change frequently. Locally, application is made through the county Department of Human Development.

Medicare - A federal health insurance program under Social Security Administration that covers the cost of certain medical and health care needs for eligible persons aged 65 and over and for some persons of any age with disabilities who meet specific eligibility requirements. Two parts: Part A: Hospitalization and Nursing Facility; Part B: Medical Expenses (physician).

Medigap Insurance - Medicare supplemental insurance which covers some services that Medicare does not.

multiservice senior centers - The provision of a broad spectrum of services that may include health, social, education, and recreation services in a community facility for older persons. Lunch is usually available.

needs assessment - The systematic collection and analysis of information about the problems and needs of individuals or groups through a variety of methods: individual citizens, service providers, surveys, public forums, etc.

## **Glossary of Aging Terms (Continued)**

nursing home - In Virginia, long-term care facilities which are licensed by Virginia Department of Health and provide patients with skilled or intermediate nursing care twenty-four hours a day.

nutrition site - Location at which congregate meals are served (see congregate meals.)

Ombudsman - A patient advocate who acts as an educator, investigator, mediator and facilitates resolution of complaints in a nursing home or adult care residence.

Older Americans Act - Enacted in 1965 (Public Law 89-73), the purpose of the federal Older Americans Act is to give elderly citizens more opportunity to participate in and receive the benefits of modern society (i.e., adequate housing, income, employment, nutrition and health care). Updated periodically through Congressional law.

outreach/client finding - Activities designed to reach out and find, on an ongoing basis, hard-to-reach individuals and to assist them in gaining access to needed services.

Peer Review Organization (PRO) - Organizations that have been given authority to conduct reviews of patient care before, during, and after hospital admissions.

personal care - Helping patients with everyday tasks, such as dressing, bathing, toileting, eating and walking. It also includes supervision.

personal care allowance - An amount of money which may be retained by a resident of a nursing home or adult care residence for use in purchasing personal items.

planning and service areas (PSA) - Geographic areas into which each State is divided for the planning and service purposes of the Older Americans Act.

preventive health services - Health-related activities designed to improve or maintain an older person's health status in order to strengthen his capacity for self-care and to maintain independent living as long as possible.

Prospective Payment System (PPS) - Federal government payment system that reimburses hospitals for services provided to Medicare patients. These patients are classified according to condition and treatment in Diagnostic Related Groups (DRGs), each of which has an assigned payment amount based on the average cost of treating the patient in that DRG.

Relay Service - Code of Virginia, Sect. 56-484.4 definition: "Telecommunications Relay Service means a facility whereby a person who has a hearing or speech disability using a text telephone and a persons using a conventional telephone device can communicate with each other via telephone".

## **Glossary of Aging Terms (Continued)**

representative payee - An administrative appointment, usually by a government agency. Power is over money only; the duties must be spelled out in a contract with the agency.

respite care - The provision of short-term care to ill persons who are living in the community so that their usual caregivers may have time away from this responsibility. The relief care may be provided either at home, in the community, or in an institution.

retirement community - Developments that typically offer home owner-ship and rental units for older people. Support services are often available for a fee.

sandwich generation - Adult children caring for their aging parents as well as for their own children still living at home.

Section 8 (rental assistance) - Federal Housing and Urban Development (HUD) government program that provides financial assistance to older people and others with qualifying low incomes. No more than 25 to 30 percent of the individual's income goes toward rent in suitable, approved HUD housing.

self-help, self-care - A concept of health care stressing that individuals can manage many of their own health problems when given sufficient instruction and appropriate medications. It teaches how/when to use self-treatment techniques, and when to seek professional help.

shared housing - Arrangement in which two or more unrelated people share a house or an apartment. Usually private sleeping quarters are available; the rest of the house is shared. Primarily for independent persons with minimal functional needs.

Silver-Haired Legislature - A body composed of delegates elected by persons 60+ within their state legislative districts to identify legislative priorities desired by older persons, and to lobby for their implementation at the local or state level.

skilled nursing facility - Long-term care facility that provides the greatest degree of medical care. Every patient is under the supervision of a physician, and the facility has a transfer agreement with a nearby hospital. Twenty-four hour nursing is provided with a physician on-call to furnish medical care in case of emergency.

Social Security (SS) - A federally financed program under the Social Security Administration which provides income to workers when they retire or are disabled and to dependent survivors when a worker dies. Retirement payments are based on workers' earnings during employment.

Supplemental Security Income (SSI) - A federally financed program that provides supplemental payments to persons who are aged, disabled or blind and already receive public assistance. The program's aim is to raise the incomes of these individuals to the poverty threshold. However, the maximum SSI payment is below the federally determined poverty rate.

## **Glossary of Aging Terms (Continued)**

support group - A group that meets on a regular basis to discuss a common concern and offer emotional support to one another, often including an educational/learning opportunity.

TDD (Teletypewriter) - A system through which a deaf person can communicate with a hearing/deaf person via the telephone line. Messages are typed through the TDD keyboard to be transmitted by phone to a printout on the receiving TDD unit. (Previously referred to as TTY.)

telephone reassurance - (checking service) Phone calls made at specified times, as needed, to or from individuals who live alone or are temporarily alone. Calls are made to determine if person is safe, well, requires special assistance, or to give psychological reassurance.

Universal Assessment Instrument (UAI) - In Virginia, a tool developed for use by trained staff from human services agencies to determine a person's need for services. The person consents to release the completed UAI form, enabling other agency staff involved in the case to use the information already collected in the assessment. The UAI saves admin. time for client and staff.

unmet needs - Client needs that cannot be met because of an existing waiting list, the lack of availability of the resource, affordable or accessible to the client.

Virginia Insurance Counseling and Advocacy Project (VICAP): Counseling program for individuals aged 60+ and their families when they need help understanding Medicare, Medicaid and medical bills, or assistance in making decisions about Medicare supplement or long-term care insurance. Locally VICAP is located at the Fairfax Area Agency on Aging.

well elderly - People who are in good health and able to live independently.

wellness - Positive, ongoing approach by an individual to become or stay healthy/healthier.

\* From the Dictionary of Terms for Senior Citizens and the Industries that Serve Them, Association for Senior Living Industries, published by the National Association of Senior Living Communities.

\*\* Some terms added locally by the staff of the Fairfax Area Agency on Aging.

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